



SAINT REGIS MOHAWK TRIBE

Grants & Contracts
412 State Route 37
Akwesasne, New York 13655
Telephone: 518-358-2272

ADDENDUM NO. 1

SRMT 14-20

REQUEST FOR PROPOSALS FOR INSURANCE SERVICES

March 11, 2014

A. The above-noted project is amended and clarified as follows:

1. Reference is made to the RFP, Page 7 of 128, Section 6. Evaluation Criteria, Costs (20 pts), delete in its' entirety and replace with:

Proposed Fees (20 pts)

Each proposal should include the Respondent's fee or commission for the identified services and a separate fee or rate for additional services that are recommended. Any additional fees, commissions or contingencies that would be earned should also be clearly identified.

B. THAT ALL OTHER TERMS AND CONDITIONS REMAIN IN FULL FORCE AND EFFECT.

Acknowledge receipt and acceptance of this Addendum #1 by submitting a copy with your proposal.

RESPONDENT'S NAME & COMPANY

DATE